

**Instructions on How a Facility Security Officer Should Review a Questionnaire for
National Security Positions, Standard Form 86 (SF-86), for industrial personnel**
Last Updated July 2006

This document contains guidance for reviewing the Questionnaire for National Security Positions, SF-86, for industrial personnel. NISPOM paragraph 2-202, "Procedures for Completing the Electronic Version of the SF 86," requires the FSO or designee to review the SF-86 to determine its adequacy and completeness before it can be sent to the Defense Industrial Security Clearance Office (DISCO.)

Sending the SF-86 electronically is the preferred method of submission and will result in faster processing of the clearance and investigation request. In July 2005, the Defense Security Service (DSS) discontinued the use of the electronic transmission of Electronic Personnel Security Questionnaires (EPSQs) and replaced this capability with the Electronic Questionnaire for Investigations Processing (e-QIP). To use e-QIP, a DoD contractor must become a Joint Personnel Adjudication System (JPAS) user. If you do not have connectivity to e-QIP via the JPAS, or if you have any additional questions or issues that you are unable to resolve, please contact the DoD Security Services Center at 1-888-282-7682 for assistance.

e-QIP provides an edit and validation feature for the SF-86 data that allows immediate correction of potential problems. The validation process discourages entry of incomplete or illogical data onto the form. Whether submitting the investigation request electronically or in hard copy, review each section of this document in its entirety as all information presented is considered the minimum requirement for an SF-86 to be approved by the DISCO.

There are a few instances when a contractor may be unable to submit a request for a clearance/investigation through JPAS/e-QIP. The [Procedures for Industrial Clearance / Investigation Requests](#) provides guidance on submission options. DSS is aggressively working the issues identified to enable industry to submit all requests via e-QIP. Hardcopy SF-86 submissions should be thoroughly reviewed since no validation process exists for these submissions.

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1. Key Points

Investigation scope for an SSBI investigation is 10 years from date of submission of the request for investigation. Investigation scope for a NACLC investigation is 7 years. Applicants must provide residence, employment and education information to meet the appropriate investigation scope.

2. Questionnaire for National Security Positions (SF-86) Criteria

a) Section 1-6 – Your Identifying Information

Name (must provide full name) **Note:** If a middle initial is provided, ***SUBJECT*** must state initial only (I.O.), or if no middle name is provided, ***SUBJECT*** must state No Middle Name. All items should be provided to include: Date of Birth, Place of Birth, County, Other Names Used, Height, Weight, Hair Color and Eye Color. For FSOs that are JPAS users, ensure the name provided on the SF-86 exactly matches the name in JPAS.

b) Section 7 – Telephone Numbers

The validation process requires complete information. Ensure the three (3) digit area code is valid and seven (7) digit phone number is present.

c) Section 8 – Citizenship

If subject is foreign born and parents are foreign born, ensure naturalization information is present.

If ***SUBJECT's*** country of birth is one of the following: the Commonwealth of Puerto Rico, Guam, American Samoa, Northern Marianas Islands, the Virgin Islands, the Trust Territory of Baker Island, Howland Island, Jarvis Island, Midway Island, Wake Island, Johnston Island, Kingman Reef, Navassa Island, and Palmyra Atoll, ***naturalization information is not required.***

If ***SUBJECT*** states U.S. National and is foreign born and parents are foreign born, ***naturalization information must be provided.***

U.S. Passport

If ***SUBJECT*** marked yes to U.S. passport, passport number and month/day/year issued are required.

Dual Citizenship

If ***SUBJECT*** states Dual Citizenship, dual country information is required.

If ***SUBJECT*** is foreign born and shows one or both parents born in the U.S., naturalization information is not required.

Resident Aliens

If ***SUBJECT*** is not a U.S. citizen, provide alien registration number, date and place of entry into the U.S.

d) Section 9 – Where You Have Lived

FOR NACLC

Must provide residence for the last 7 years or until Subject's 16th birthday.

For all other residence coverage requirements, follow guidelines for SSBI.

FOR SSBI

Must provide residence for the last 10 years or until subject's 18th birthday. If under 21 years of age must provide 2 years coverage or the period since subject's 16th birthday.

Dates of coverage must be consecutive and without breaks for the entire period or an explanation must be provided.

Residence coverage must be within commuting distance of employment unless explained. ***Note: If SUBJECT is a Consultant or employed by a commercial carrier, or the Merchant Marine, employment need not be within commuting distance.***

Residence coverage must include complete addresses to include ZIP Codes.

P.O. Box Numbers are not acceptable.

APO/FPO addresses are acceptable if within commuting distance of employment.

e) Section 10 – Where You Went To School

FOR SSBI/NACLC

Required Data. List education for the last 10 years or list the most recent education beyond high school, no matter when education occurred. Details must include name of school, city, and state.

f) **Section 11 – Your Employment Activities**

First employment listed should be information pertaining to the organization submitting the clearance request. In pre-employment situations, the employment information for that organization may be provided within Remarks. Pre-employment provided in remarks should include: Employer Name, Employer Street Address, City, State, and ZIP Code.

FOR NACLC

Must provide employment for the last 7 years.

For all other employment coverage requirements, follow guidelines for SSBI.

FOR SSBI

Must provide employment for the last 10 years or until subject's 18th birthday. If under 21 years of age, must provide 2 years or the period since subject's 16th birthday.

Make sure residence and employment are within reasonable commuting distance. **(Example:** Subject lists residence in California and employment in Virginia with no explanation. This will be rejected for more information unless it is explained.

Dates of coverage must be consecutive and without breaks for the entire period or an explanation must be provided.

If present employment reflects subject is at a classified job site, accept as is.

Must provide complete addresses for employment coverage to include name of employer.

APO/FPO addresses are acceptable if within commuting distance of residence.

All military duty stations must be provided.

If subject was aboard ship must provide all homeports.

Overlapping employment is acceptable if within commuting distance of each other.

If unemployed/self-employed, must provide reference to verify (can use spouse/parents as reference).

Dates of coverage must show month and year.

If subject's job title is Field Representative, employment must still be within commuting distance of residence, or subject must provide details as to why they are not.

Federal Civil Service, provide Employer Name, Employer Street Address, City, State, and ZIP Code and dates of employment.

g) **Section 12 – People Who Know You Well**

Provide information for each field.

h) **Section 13/15 – Your Spouse**

Provide information for each field.

If spouse was born abroad and is now a U.S. citizen, naturalization information is required. If not a U.S. citizen but living in the U.S., alien registration number with date and place of entry into the U.S. is required. If divorced within 10 years, complete information must be provided for former spouse (s).

Note: Spouse Naturalization / Alien Registration information of foreign born spouses is provided in Section 14/15 Your Relatives and Associates.

i) **Section 14/15 – Your Relatives and Associates**

Must provide information on relatives and associates. Information must include date, place of birth (city, state), present residence and citizenship.

SUBJECT must provide complete information on spouse-like relationship or co-habitant. This includes the social security number of all spouse-like relationships or co-habitants.

If relatives and associates were born abroad and are now United States citizens, must provide naturalization information. If not U.S. citizens but living in the U.S., must provide alien registration number with date and place of entry into the U.S.

Note: Immediate family members only must be listed. Immediate family member is defined as **SUBJECT's** current spouse or current cohabitant, **SUBJECT's** father, mother, sons, daughters, brothers, sisters.

j) **Section 17 – Your Military History**

Required Data. Information must include Dates, Branch of Service.

k) **Section 18 – Foreign Activities**

Required Data. When answered Yes, provide details.

l) **Section 19 – Your Military Record**

Required Data. When answered Yes, provide details.

m) **Section 19 – Your Military Record**

Required Data. If other than Honorable Discharge, include type of Discharge, and date of Discharge.

n) **Section 20 – Your Selective Service Record**

If answered Yes/No, provide an explanation. (When ***SUBJECT*** states he is a male born after December 31, 1959 and has not registered for Selective Service, a legal exemption reason must be provided.) To verify Selective Service registration, contact the Selective Service System at 1-847-688-6888 for assistance.

o) **Section 21 – Your Medical Record**

Required Data. If answered Yes, unless treatment involved marital, family, or grief counseling, not related to violence by subject, dates of treatment and name/address of health professional should be provided.

p) **Section 22 – Your Employment Record**

Required Data. If answered Yes, provide date, specific reason, employer's name, and address.

q) **Section 25 – Your Police Record**

Required Data. If answered Yes, provide date, offense, action taken, law enforcement authority/court, state and ZIP Code.

r) **Section 24 – Your Use of Illegal Drugs and Drug Activity**

Required Data. If answered Yes, provide dates of usage, controlled substance/prescription drug used and the number of times used.

s) **Section 25 – Your Use of Alcohol**

Required Data. If answered Yes, provide dates, name and address of counselor or doctor.

t) **Section 26 – Your Investigations Record**

The validation process requires Type, Date, Agency, and Clearance.

u) **Section 27 – Your Financial Record**

Required Data. If answered Yes, provide Date of Action, Type of Action, Amount, Name Action Occurred Under, Court/Agency Name, and complete Street Address of Court/Agency. Information should be presented for each bankruptcy, garnishment, lien, or judgments within 7 years.

v) **Section 28 – Your Financial Delinquencies**

Required Data. If answered Yes, provide Month / Year, Agency Code, and complete Street Address. Information should be presented for each delinquent debt overdue 180 days or more within 7 years or currently overdue more than 90 days.

w) **Section 29 – Public Record Civil Court Actions**

Required Data. If answered Yes, provide date, nature of action, result of action, names of parties involved and court (include city and state or country if outside US).

x) **Section 30 – Your Association Record**

Required Data. If answered Yes, provide Month / Year, Agency Code, and Clearance Code.

3) **Continuation Space**

Requirements concerning involvement in Special Access Programs or Sensitive Compartmented Information may be located here.

4) **Certification That My Answers Are True**

Must be provided to the Office of Personnel Management within 14 days of approval by the DISCO.

5) **Expected Attachments**

Must be provided to the Office of Personnel Management within 14 days of approval by the DISCO.